

NE

017-00-00

09.933166

CLAIMS AS FILED - PART I

(Column 1)	(Column 2)
TOTAL CLAIMS	
FOR	NUMBER FILED
TOTAL CHARGEABLE CLAIMS	minus 20=
INDEPENDENT CLAIMS	minus 3 =
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>	

* If the difference in column 1 is less than zero, enter "0" in column 2

pre-amdt filed
3/22/04

CLAIMS AS AMENDED - PART II

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	94 Minus	96
Independent	20 Minus	20
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

TYPE	RATE	FEE	OR	RATE	FEE
BASIC FEE	370.00		OR	BASIC FEE	
X5 =			OR	X5A =	
X42 =			OR	X84 =	
+140 =			OR	+280 =	
TOTAL			OR	TOTAL	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X5 =		OR	X518 =	
X42 =		OR	X84 =	
+140 =		OR	+280 =	
TOTAL		OR	TOTAL	

BEST AVAILABLE COPY

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	70 Minus	96
Independent	14 Minus	20
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X5 =		OR	X518 =	
X42 =		OR	X84 =	
+140 =		OR	+280 =	
TOTAL		OR	TOTAL	

1-204

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	61 Minus	96
Independent	11 Minus	20
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X5 =		OR	X518 =	
X42 =		OR	X84 =	
+140 =		OR	+280 =	
TOTAL		OR	TOTAL	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the Highest Number Previously Paid For in THIS SPACE is less than 20, enter "20."
If the Highest Number Previously Paid For in THIS SPACE is less than 3, enter "3."
The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.